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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

FILED

Apr 09 1997 8:00am

Secretary of State

4/2/97 954-564-6491

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 352224

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Principal Place of Business Mailing Address 4058 NORTHEAST SEVENTH AVENUE 4058 NORTHEAST SEVENTH AVENUE FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334-3028 3. Date incorporated or Qualified 3a. Date of Last Report 04/10/1996 09/15/1969 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1271136 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite. Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country This corporation has liability for intangible tax under s. 199.032, Country Yes No Florida Statutes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FLEMING, O'BRYAN & FLEMING **500 E BROWARD BLVD B2** Street Address (P.O. Box Number is Not Acceptable) BROWARD FINANCIAL CENTER 63 FT. LAUDERDALE FL 33338 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or punted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. 96/6 Change Addition TSD □ DELETE 1.1 TITLE TITLE WALLACE, MAURINE H NAME 1.2 NAME 1060 NE 27TH TERR 1.3 STREET ADDRESS STREET ADDRESS POMPANO BCH, FL 00000 1.4 CITY-ST-ZIP City-St ZiP DELETE Addition PD Change 2.1 TITLE THILE WALLACE, RÖGER W 2.2 NAME NAME Decensed 1060 NE 27TH TERR 2.3 STREET ADDRESS STREET ADORESS POMPANO BEACH, FL 00000 2 4 City-St-ZiP CITY-ST-ZIP N Change Addition DELETE fees 1 dent 3.1 TITLE TITLE WALLACE, GEORGE A 3.2 NAME NAME 11490 NW 23RD ST 3.3 STREET ADDRESS STREET ADDRESS PLANTATION ACRES,FL00000 211 CODE 33323 3.4. CITY-ST-ZIP CITY+ST ZIP VICE PRESIDENT-CONSTROLLE DIRECTOR & Change DELETE 4.1 TITLE TITLE JERRY SEILER 4, 2 NAME NAME 8033 NW 28TH STREET 4.3 STREET ADDRESS STREET ADDRESS SUNRISE FL 218 COOR 33322 4.4 CITY - ST - ZIP CITY-ST ZIF DELETE Change Addition . 5.1 TITLE DIRECTIR THILE Diane A. Wallace 10745 Dun hill Terrace 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS Raleigh, NC 27615 5.4 City-St-ZIP CITY-SI-7P 61 TITLE Change Addition ☐ DELETE THEF 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CHTY - ST - 21F 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiptor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name